

Wills Eye Hospital is an affiliate of Jefferson Medical College
Thomas Jefferson University

Major Accreditations and Approvals

Joint Commission on the
Accreditation of Hospitals
Pennsylvania Department
of Health
College of American
Pathologists
Pennsylvania Hospital
Insurance Company
Accreditation Council for
Graduate Medical Education

Memberships

American Hospital Association
Hospital Association of
Pennsylvania
The Delaware Valley
Hospital Council
Association of Eye and
Ear Hospitals



More than four million people have come to Wills Eye Hospital since its founding in 1832. They have come from every corner of the earth—from almost every nation in the world, from every state and from our surrounding communities and neighborhoods. Some have come for basic eye examinations. Others have come to find relief from the rarest of sight-threatening diseases.

This year's annual report focuses on eight of the four million people whom Wills has helped. Although their eye problems differed widely, they all shared a common and highly personal bond—the impending loss of their most important sense—sight.

These eight people, representative of four million, stand as a living testament to our mission—to preserve, protect and restore the precious gift of sight.

Less than two dozen medical institutions in the world have made the preservation of sight their sole reason for being. Even fewer in the United States. Of these highly specialized institutions, Wills Eye Hospital was the first in the nation—founded in 1832. It is also the largest—during the past year alone, nearly 204,000 people sought treatment at Wills.

But Wills is more than just an eye hospital. It is, as well, a prestigious educational institution, with the largest and most sought-after ophthalmological residency program in the country. Further, Wills is a center for important eye research. And it is a unique resource for state-of-the-art ophthalmic technology.

While the number of patients treated annually at Wills continues to grow, the amount of time each patient spends at Wills is steadily decreasing. This trend toward shorter stays in the Hospital and larger numbers of ambulatory treatments is the result of rapid advances in ophthalmic technology.

Procedures like cataract surgery once required lengthy stays in the Hospital after the operation. Now these procedures are often done in a matter of hours on an ambulatory basis. Likewise, an increasing number of eye disorders that previously required operating room surgery are now being managed and treated with lasers in an ambulatory setting.

To better accommodate the growth in same-day surgery at Wills, we renovated and expanded our Day Surgery Unit during the past year. Generously supported by the Women's Committee for Wills Eye Hospital, this vital project enables us to treat more than twice the previous number of patients. During the coming year, we will further expand our surgical capabilities by opening a ninth operating room.

Wills continues to pioneer the use of the laser in the treatment of ocular disorders including cancer, retinal tears, diabetic retinopathy, glaucoma and complications arising from cataract surgery. Last year, new and more powerful lasers were acquired, and a laser suite was created in the Hospital's General Ophthalmology Service. This suite enables physicians to treat post-cataract and glaucoma conditions in a quick, painless and highly cost-effective manner.

In order to improve our ability to detect and diagnose abnormalities in the eye, Wills sought approval from the Health Systems Agency to acquire a CT Scanner—a highly sophisticated diagnostic imaging device.



William D. McGuire

Approval was received by unanimous vote, and installation is scheduled for early 1985.

These improvements, though costly, have strengthened patient care. Over the years, the generosity of private donors has helped Wills to remain a pacesetter for ophthalmic advances. This tradition, fortunately, continues. Last year was marked by a record level of support from our communities. The inauguration of The Fund for Vision, Wills Eye Hospital's first, formal annual giving program, was warmly received. The Fund for Vision resulted in contributions of more than \$65,000 in the first year. In addition, Wills was the recipient of two major charitable bequests. We received \$3.3 million from the estate of Ethel Brown Foerderer to establish a center for the study of eye movement problems in children and a \$1 million bequest from the estate of William A. Goldberg to augment the fellowship programs in the Cornea, Glaucoma and Neuro-Ophthalmology Services. The Women's Committee for Wills Eye Hospital, Fight for Sight, Inc., and the Pennsylvania Lions, long-time benefactors of Wills, continued important fund-raising efforts on behalf of the Hospital.

Hospitals today are faced with dramatic changes in the way they are regulated and reimbursed. It is a time, indeed, when the economic viability of many hospitals is being threatened. Wills, fortunately, remains financially sound. Recognizing the importance of financial planning in positioning for the future, the Hospital developed a number of fiscal programs several years ago. Chief among them was a cash investment program that continues to generate income to assist us in accomplishing our mission: \$339,000 in the past year alone. Concurrently, additional streamlining of our operating and capital budgeting process has allowed us to hold the line on expenditures. And further enhancement of our data processing/management information system has enabled us to better monitor and control costs.

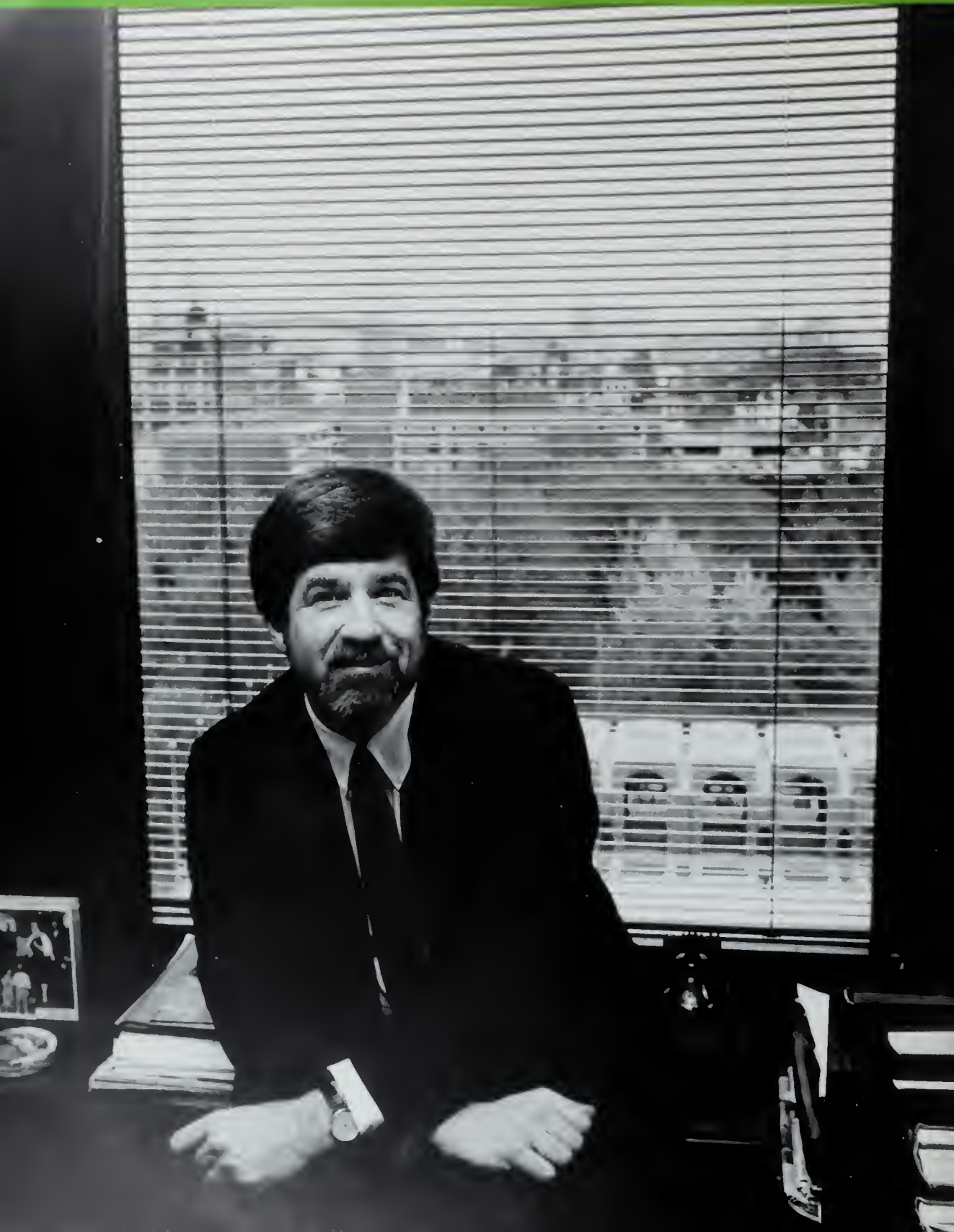
Although the changing reimbursement climate brings clouds of uncertainty to our horizon, we remain fully committed to maintaining Wills' traditional standards of excellence. However, if we are to be successful in the future, we will need to rely more and more upon private support to ensure the margin of excellence that has marked Wills Eye Hospital since its founding. We are confident that those we have served so well will help us to meet the challenge.



Robert D. Reinecke, M.D.

William D. McGuire
Executive Director

Robert D. Reinecke, M.D.
Ophthalmologist-in-Chief



Patient Care

Every year, Wills Eye Hospital introduces new treatments, adds new and highly sophisticated technology and adapts Hospital facilities to keep pace with the latest changes in ophthalmology and the needs of our patients. This past year was no exception, and was marked by the continual growth of our services.

Many surgical procedures which required in-hospital stays are now being performed on an ambulatory basis. To meet the growing demand on our outpatient surgical facilities, Wills completed expansion of the Day Surgery Unit early in 1984. The Unit, which has handled six to eight cases per day, is now being utilized for

twice that number. It is expected to reach its projected maximum capacity of 25 procedures per day by the end of 1984.

The Day Surgery Unit remodeling included a number of special features designed to increase the comfort and privacy of our patients—making their visit to Wills as pleasant and positive as possible. This is particularly important for pediatric patients, who currently make up 80 percent of Day Surgery's cases. Procedures performed in the unit include eye muscle surgery, removal of tumors from around the eye, examinations

"I needed a corneal transplant for a long time, but I resisted out of fear. Finally, when I consented, the vision in my eye was almost gone. The operation was fast and painless, and the results were immediate. I was amazed at how well I could see!"

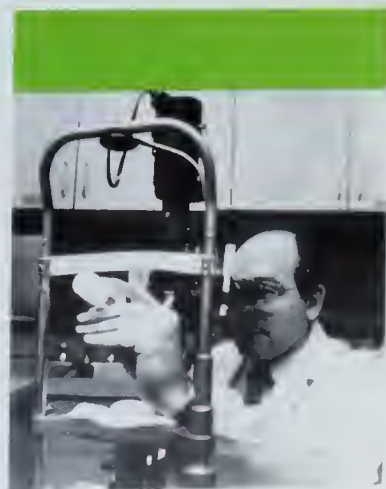
Bob Moss' transplant was an extraordinary experience for him, as it is for all corneal transplant patients. During the year, 350 corneal transplants were performed at Wills. In 95 percent of these cases, vision was substantially improved or completely restored.

Wills' Cornea Service physicians treated a total of 14,000 patients last year for conditions ranging from keratoconus—the disease that attacked Mr. Moss' eyes, in which the shape of the cornea gradually becomes irregular—to corneal ulcers, viral infections, corneal dystrophies and trauma to the cornea.

In addition to clinical care, the Cornea Service is engaged in active research. Research projects currently underway are investigating the herpes simplex virus,

bacterial corneal ulcers and the problem of graft rejection. The initial phase of one study, Prospective Evaluation of Radial Keratotomy (PERK), was completed last year with promising results. This new surgical treatment for nearsightedness will now be performed at Wills on a limited basis for patients who meet specific criteria.

During the year, members of the Cornea Service published 15 scientific papers or chapters in textbooks and were visiting lecturers at 50 major meetings around the world.



under anesthesia, cataracts and surgeries on the tear duct system. When discharged from the Day Surgery Unit, patients are given instructions on their post-surgical care and are closely monitored by our staff to ensure that recovery is progressing smoothly at home.

In our continuing commitment to provide the most effective modes of treatment, Wills Eye Hospital added several lasers during the year. Our new argon and state-of-the-art YAG lasers were installed in a specially constructed suite in the General Ophthalmology Service. These instruments

are used in treating glaucoma and complications arising after cataract surgery. In addition, we have equipped the Oculoplastic Service with a new and versatile hand-held attachment for the argon laser. This instrument is being used to remove spider veins, vascular tumors on the skin or eyelid and other lesions simply and painlessly. The attachment offers a dramatic improvement over past treatment alternatives, enhancing both comfort and effectiveness for the patient.

Wills also received unanimous approval from the Health Systems Agency to purchase a CT Scanner. Employing the principles of x-ray technology and digital computers, this advanced model of the CT Scanner will

Erica Lyman, 44
West Chester, Pennsylvania



provide Wills with a highly precise diagnostic imaging tool. It will enable our physicians to pinpoint the location of foreign particles lodged in the eye, to determine the size, density and precise location of ocular tumors and to accurately detect masses in the brain which may be affecting vision. The GE 9800 CT Scanner is scheduled for installation in early 1985.

The Low Vision Service continues to grow. In its second full year of operation, the Service treated nearly 900 persons for whom medical and surgical options had been exhausted.

Many patients were fitted with optical aids which allow them to make full use of their remaining vision.

Wills again demonstrated an active commitment to community eye health during the year. The third annual public eye screening, held over a two-day period in the spring, resulted in the examination of 1,200 people. Of these, approximately 25 percent needed some type of follow-up care, including treatment for sight-threatening conditions such as glaucoma and retinal detachment.

Two new groups were formed at Wills during the year to address special needs among our unique and diverse patient population. "Singular Visions" was initiated by members

of the Wills nursing staff to provide specialized support for patients undergoing enucleation—the removal of an eye. These volunteers focus on the critical period from diagnosis through the weeks immediately following the surgery, and make themselves available to the patient to offer specialized information and emotional support. A twenty-four hour "hotline" has been established to assist patients after discharge.

Another group begun at Wills during the year is "Ambassadors for

"I had been thrown from horses before, but this was bad. My nose was crushed and my eye was seriously injured. The doctors at Chester County Hospital immediately transferred me to Wills. I was frightened that I'd lost the eye, or that I'd be disfigured for life. It took four hours of skillful surgery by Wills' experts, but now you'd have a hard time noticing that I'd had the accident."

Serious injuries to the area surrounding or involving the eye are skillfully treated in Wills' Oculoplastic Service. During the year, some 2,000 patients were treated for a variety of problems ranging from the kind of serious reconstruction needed by Erica Lyman to the correction of baggy eyelids, blocked tear ducts or infections in the tissues surrounding the eye. The Oculoplastic Service also specializes in eyelid and orbital tumors, treating more of these cases than any other department of its kind in the world.

Often these conditions must be treated in the operating room utilizing sophisticated surgical techniques, as in Mrs. Lyman's case. In many instances, however, outpatient treatment in Oculoplastic's own minor surgical suite is performed.

One new means of treatment is a hand-held attachment for the argon laser. This new device allows Oculoplastic surgeons to remove spider veins, vascular tumors and other lesions in a quick and painless manner on an outpatient basis.

The Oculoplastic Service staff contributed 15 articles to professional journals during the year and presented 45 talks as visiting professors at medical institutions around the world.





Corneal Transplant," known by its simple acronym ACT. ACT grew out of the long and continuing efforts of the Lions Eye Bank of Delaware Valley, which is headquartered at Wills. ACT is a person-to-person contact group, made up largely of former corneal transplant patients. ACT members provide support to ease the anxieties of patients facing corneal transplantation, and are active in promoting the need for eye donations.

Education

Wills Eye Hospital enrolled its first resident of ophthalmology in 1837, just five years after its founding. Our commitment to education has continued unabated in the decades since, and Wills' residency program has been for many years the largest in the nation. During the past year, 37 physicians were enrolled in the three-year program.

Other programs included fellowships for select ophthalmologists who had completed residencies at Wills or at other hospitals. These fellowships were pursued by 18 ophthalmologists in the subspecialties of Cornea,

"My doctor told me I had glaucoma about four years ago. Even though I was being treated, I was worried about it getting worse, so I came to Wills. I'm glad I did. I needed an operation, which has helped a lot. Before, I didn't know whether life would be worth living without vision. Thanks to Wills, I didn't have to find out."

Sarah Twigg was one of the nearly 14,000 patients who came to Wills' Glaucoma Service last year. The leading glaucoma referral center in the nation, this Service offers the glaucoma patient the most sophisticated diagnostic and treatment capabilities currently available.

Glaucoma may be treated with medication, laser therapy or, in serious cases like Mrs. Twigg's, through microsurgery. Wills' Glaucoma Service Diagnostic Laboratory has seen more than 1,600 glaucoma patients since its opening in 1982. In addition to providing the patient with a comprehensive battery of tests, it continues to accumulate vast amounts of data which ultimately may hold the key to prevention of vision loss from the disease.

This past year, Wills' Glaucoma Service was selected to participate in a major

national research effort known as the Glaucoma Laser Trial. This study, funded by the National Eye Institute, will compare the safety and effectiveness of argon laser treatments with standard programs using eye drops and oral medication. Other research projects are routinely undertaken to evaluate new medications, new surgical techniques and the use of new surgical instruments.

This past year Glaucoma Service physicians delivered a total of 103 lectures to professional groups all over the world and published three textbooks and 38 scientific papers.





Glaucoma, Neuro-Ophthalmology, Oculoplastics, Oncology, Pediatrics, and Retina for a period of one or two years.

A new educational commitment recently undertaken by Wills is the clinical training of junior and senior medical students from Jefferson Medical College. The innovative curriculum begun in October 1984 was planned during the past year by the Wills Medical Education Committee in conjunction with the undergraduate Education Department at Jefferson. As part of a Neuroscience Course, students will spend 10 con-

secutive days at Wills, attending subspecialty lectures and acquiring clinical experience.

Other educational opportunities are offered to medical students as well. Last year 70 seniors from Jefferson and other medical schools enrolled in four-week voluntary clerkships, where they gained hands-on experience under supervision. In addition, 10 medical students were involved in summer research projects at Wills, and 20

"My son was only 2½ when he was diagnosed as having cataracts. A month later, Ryan was operated on at Wills. When he was five, we returned for the removal of a second cataract. Now, he's eight—and, because of Wills, he's growing up like any other child his age."

Vicky Eberly, mother of Ryan Eberly

At Wills, children are special patients. They require different diagnostic and treatment methods than adults. Last year, Wills' Pediatric Ophthalmology Service treated some 14,700 children for conditions ranging from strabismus (crossed eyes) and amblyopia (lazy eye) to glaucoma and cataracts.

Many surgical procedures are carried out through Wills' expanded Day Surgery Unit on an outpatient basis. This eliminates the fear associated with overnight stays in the hospital. When overnight stays are necessary, a parent is encouraged to stay in the room with the child. In the Pediatric Ophthalmology Service, understanding the emotional needs of children is as vital to successful treatment as understanding the disease.

Hand-in-hand with treatment in Pediatric Ophthalmology is research. Many clinical studies are currently underway. Botulinum toxin injections are being studied as a treatment for strabismus. Doctors are investigating the natural course of blocked tear ducts and new ways of diagnosing and treating cataracts, glaucoma and nystagmus in children.

Pediatric Ophthalmology Service physicians published two textbooks and 29 scientific papers during the past year and delivered 66 lectures at major institutions in the United States and abroad.



medical and surgical residents from other hospitals rotated through the Emergency Room, gaining practical experience in the management of eye trauma.

An educational program honoring Wills' former Ophthalmologist-in-Chief Thomas D. Duane, M.D., Ph.D., was planned during the year by Jefferson medical students. Last spring they founded the Thomas D. Duane Society, a group devoted to assisting future medical students in making

decisions about their future careers, through insightful discussions with practicing ophthalmologists.

Monthly grand rounds and daily lectures continue to be major elements of medical education at Wills. There are also important continuing education conferences and seminars for ophthalmologists, non-ophthalmic physicians and nurses. Last year Wills held a total of 15 seminars which attracted 852 registrants from every state in the union and from many foreign countries. The topics ranged from updates on subspecialties to practical courses on surgical techniques, including the laser.

Merancia Cyrille, 81
Somerset, New Jersey



The Annual Clinical Conference was again an educational highlight of the year. This conference, the 36th, attracted more than 1,100 participants and included three symposia, 17 workshops, and more than 80 presentations on a broad range of ophthalmic subjects.

At the annual meeting of the American Academy of Ophthalmology, held in Chicago, several members of the Wills staff were honored for their contributions to ophthalmic education.

Wills was also well represented on the educational roster, contributing to 23 sessions and 35 courses.

Wills' commitment to ophthalmic education was further demonstrated by its participation in a new pilot program that was sponsored by the American Academy of Ophthalmology. This four-day course, a first in Philadelphia, involved three area hospitals and provided hands-on training for 155 ophthalmologists in new surgical techniques. At Wills, they received instruction on use of the newest and most powerful ophthalmic laser, the YAG, two of which are in daily operation at Wills.

Over the years, Wills ophthalmologists have shared their research and clinical findings with physicians world-wide, expanding the body of knowledge in their fields of expertise. During the past year members of the Wills Medical Staff published five textbooks and more than 220 scientific articles, and made 443 presentations all over the world, demonstrating the major commitment Wills and its Medical Staff have made to ophthalmic education.

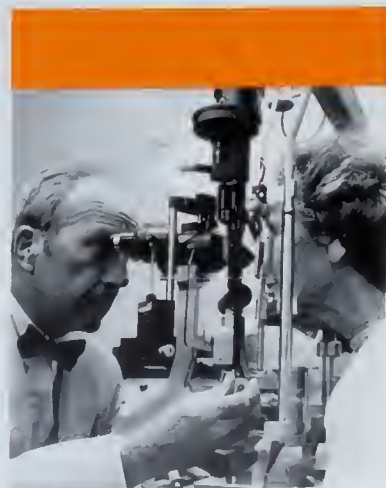
"When a cataract was discovered in my right eye, I thought I was doomed to blindness. You see, I had already lost the vision in my left eye to glaucoma. I was afraid of cataract surgery, but my family convinced me to go ahead. It was the best decision I ever made. Now I can take care of myself again. It's wonderful to be independent."

Merancia Cyrille's history of glaucoma seriously complicated the surgery that was necessary to treat a cataract which was robbing her of sight in her useful eye. But Wills' expertise in cataract surgery, combined with the use of advanced technology, restored her vision.

The General Ophthalmology Service is the largest of Wills' Services, seeing nearly 37,000 patients during the past year. Some required only new glasses. Others, like Mrs. Cyrille, were diagnosed as having far more serious eye problems. Last year, surgeons from the General Ophthalmology Service performed over 3,500 cataract operations. The expanded Day Surgery Unit allows for increasing numbers of these procedures to be carried out on an ambulatory basis.

During the year, a laser suite was created to house an argon laser and one of the newly developed YAG lasers. These lasers are being employed to treat glaucoma and to make a frequently needed opening in the posterior capsule of the lens following cataract surgery. The Service also expanded its patient screening areas in order to better serve its large patient population.

During the year, staff members on the General Ophthalmology Service published 20 scientific papers and presented 43 lectures in the U.S. and abroad.



Jeff Breidegam, 30
Oley, Pennsylvania



Research

Research is an important facet of Wills' mission to preserve sight. Clinical research programs, in concert with laboratory studies, hold the promise of new and effective treatments for the victims of eye disease.

Wills physicians see and treat vast numbers of patients, often with rare eye diseases. This provides us with an unparalleled opportunity to observe the long-range effectiveness of many new treatment methods in large patient trials.

More than 150 patients suffering from severe eye muscle problems have benefited from the participation

of the Pediatric Ophthalmology, Oculoplastic and Neuro-Ophthalmology Services in a nationwide study of the effectiveness of a new and experimental treatment. This treatment, which involves the injection of minute quantities of botulism toxin, is being used to successfully treat serious cases of strabismus, or crossed eyes. Victims of blepharospasm, a disabling disorder in which the patient's eyelids spasmodically close uncontrollably, are also finding this treatment effective.

"I lost the vision in my left eye as a result of a childhood accident. When, many years later, I found that I was losing sight in my remaining eye, I was scared. By the time of the operation, all I could see were blurred movements. Now, I see so well that I can drive again. I always had faith that something could be done. Wills Eye Hospital didn't let me down."

In Jeff Breidegam's case, diabetes was the culprit. Diabetic eye disease, the leading cause of blindness in the nation, causes blood vessels to rupture and invade the fluid in the eye, blocking off light and vision. Wills' Retina Service annually sees 15,000 patients, many of whom suffer from this frightening complication of diabetes.

A vitrectomy operation restored Mr. Breidegam's vision. In this procedure, the patient's vitreous, the jelly-like substance which fills the inside of the eye, is removed by suction and replaced with clear fluid. Lasers may be used at the time of vitrectomy surgery in order to seal off hemorrhaging blood vessels. Patients are also treated in the Retina Service for detached retinas, macular degeneration, retrolental fibroplasia and intraocular

foreign bodies. The treatments employ highly specialized technology including electrophysiologic testing, cryotherapy, laser surgery and delicate state-of-the-art microsurgical techniques.

During the year, the Retina Service continued its participation in ETDRS, a national research program into diabetic retinopathy. A new study of degenerative diseases in children was begun and new breakthroughs in the treatment of retinal detachments in premature infants were made.

During the year, Retina Service staff contributed 34 scientific papers to professional journals and presented 91 lectures at major medical meetings here and abroad.



The Neuro-Ophthalmology Service has also completed the sixth year of a study of Graves' ophthalmopathy. This study focuses on the immunological basis of this thyroid-related condition, which frequently results in blindness. Wills sees and treats more victims of Graves' ophthalmopathy than any other eye center in the country.

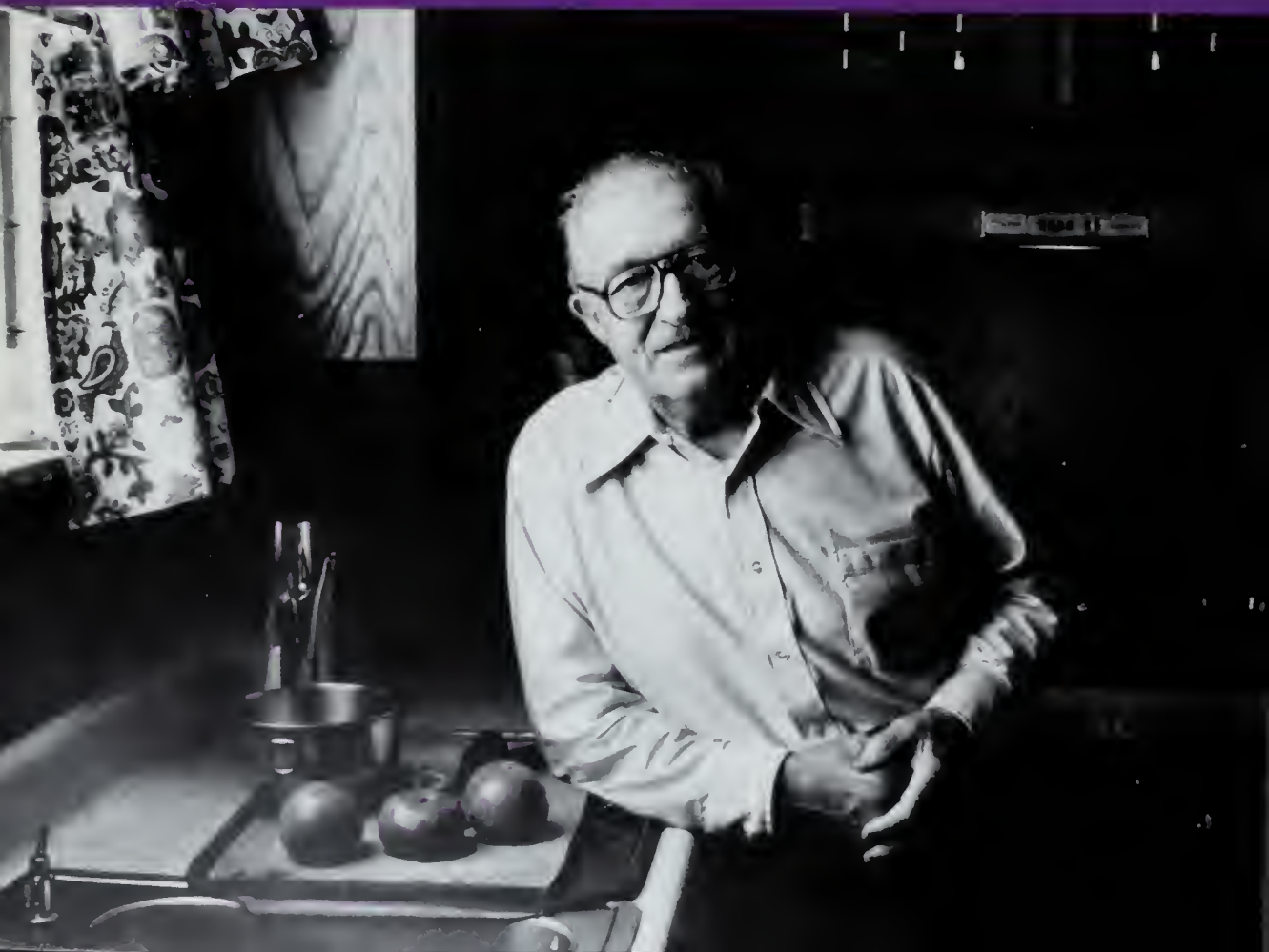
In a clinical study concluded by Wills' Pediatric Ophthalmology Service during the year, researchers

found that children born with blocked tear ducts could be treated successfully without surgery in 94.7 percent of all cases studied. Treatment with medication alone corrected this disorder, in most cases, by the time the infant had reached 12 months of age.

Another pediatric study initiated last year compares the conventional surgical treatment of esotropia (a condition in which the eyes turn inward) with a technique involving the pre-operative use of eyeglass-mounted prisms.

In an important National Eye Institute study now in its third year, Wills' Cornea Service is testing the effective-

John Gimbar, 72
Pennsauken, New Jersey



ness of radial keratotomy as a viable treatment for nearsightedness. This program, called Prospective Evaluation of Radial Keratotomy (PERK), has evaluated the procedure on some 60 specially selected patients. Patients in the study will be monitored for three more years to determine the effects of this relatively new treatment. The results to date have led the Cornea Service to make the radial keratotomy surgery available to other patients who meet certain criteria.

The Cornea Service is also con-

ducting careful post-operative evaluations of patients who have had corneal transplants. This five-year study is structured to provide better information on factors which lead to rejection of the transplanted cornea in some patients.

Wills is one of six eye centers across the nation participating in a National Eye Institute study comparing the effectiveness of treatments for open-angle glaucoma. The study compares treatment with the argon laser against treatment involving a combination of eyedrops and oral medication in newly-diagnosed glaucoma patients.

The Retina Service is investigating the effectiveness of treating eye complications of diabetes with lasers and aspirin. This National Eye Institute study includes some 200 patients at Wills.

During the year, the Retina Service received a grant of \$30,000 from the Florence R.C. Murray Charitable Trust for research on degenerative diseases of the retina affecting children from birth. This study will include comprehensive testing of patients with these hereditary diseases and their blood relatives.

"It's a strange condition. 'Blepharospasm.' I had never heard of it before, but it was ruining my life. As a retired chef, I love to cook, but this condition made my eyes clamp shut uncontrollably. None of the doctors I saw could help until I came to Wills. The treatment I received has meant everything to me. Now I can live normally again!"

The close association of the nervous system and the eye often results in strange and debilitating problems. Sudden blindness, or blurred vision, with no apparent cause. Or, in cases like John Gimbar's, the frustration of uncontrollable eyelid spasms.

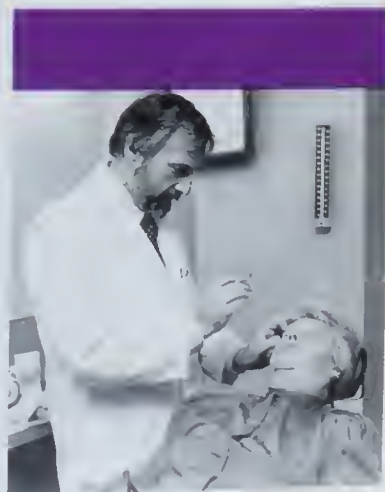
Physicians in Wills' Neuro-Ophthalmology Service work like detectives to find the underlying cause of each patient's visual problem. Last year, they treated 6,300 patients for conditions ranging from blepharospasm to myasthenia gravis, Graves' ophthalmopathy, strokes and tumors of the brain.

New and improved treatments are continually sought and tested in the Neuro-Ophthalmology Service. Mr. Gimbar was one of 68 patients from across the nation and abroad who sought help for bleph-

arospasm. These patients benefited from a new treatment, involving the injection of minute amounts of botulism toxin which temporarily paralyzes the muscles causing the spasm.

A new surgical procedure, Optic Nerve Sheath Decompression, was initiated last year. It has achieved promising results in releasing fluid which is pressing on the optic nerve.

During the year, Wills' Neuro-Ophthalmology physicians published 32 scientific papers and presented 40 lectures around the world.





Retina's Uveitis Unit is testing a new medication to treat certain forms of severe uveitis, an inflammatory condition of the eye. This medication is derived from a fungus and was originally developed to keep heart transplant patients from rejecting the donor organ.

Laboratory research on the diagnosis and treatment of ocular tumors continued during the year with a number of ongoing studies in the Research Department in conjunction with the Oncology Service. Some of these studies focus on the relationship of the human immune system and eye tumors. One such study involves

the production of monoclonal antibodies that will react to eye tumors and retinal proteins to allow earlier detection and diagnosis of developing tumors. The human immune system is also the subject of research underway on herpes, the most common viral infection of the eye.

Over the past year, these studies have continued to add to our growing bank of information about the nature, treatment and ultimate cure of many of the most devastating eye diseases.

"Diagnosis of an eye tumor is a shock. Fear reaches beyond loss of vision, for cancer is a threat to life itself. But the treatment I received at Wills shrunk the tumor, and also left me with useful vision in the affected eye. Going through this ordeal has taught me a lot about myself. Wills helped me, not only with treatment, but by providing important emotional support."

Wills Eye Hospital is the largest eye tumor center in the nation. Last year, more than 3,200 patients were treated in Wills' Oncology Service, each with a potentially sight-threatening tumor.

The principal treatments involve the use of a variety of surgical procedures, radiation methods and laser photocoagulation techniques.

In Mrs. Kimball's case, an implanted cobalt plaque irradiated the tumor, successfully shrinking the cancerous growth.

Vast practical experience with eye cancers provides Wills' Oncology Service with an unparalleled opportunity for research. Undertaken in concert with Wills' Research Department, studies include evaluation of the immune system of cancer

patients and close and continuing monitoring of the effectiveness of current cancer treatments. The ultimate goal, a better understanding of cancer itself, has practical value beyond the realm of ophthalmology.

The Oncology Service staff authored a total of 26 scientific papers during the year, and presented 77 lectures as visiting professors at medical institutions throughout the United States and in many foreign countries.



OPERATING FUNDS—BALANCE SHEET

June 30, 1984

Current Assets:

Cash & Certificates of Deposit	\$ 4,846,103
Accounts Receivable, Net of Allowances	89,764
Inventories	353,337
Other Current Assets	403,881
Total Current Assets	\$ 5,693,085

Other Assets:

Property, Plant & Equipment	\$28,434,337
Less: Accumulated Depreciation	7,795,723
	\$20,638,614
Funds Held by Trustee	5,800,323
Investments—Board Designated	3,808,224
Deferred Financing Costs, Net	600,458
Total Other Assets	\$30,847,619
Total Operating Assets	\$36,540,704

Current Liabilities:

Current Portion of Long-Term Debt	\$ 300,000
Accounts Payable	1,701,108
Accrued Expenses	590,468
Total Current Liabilities	\$ 2,591,576

Other Liabilities and Fund Balances:

Long-Term Debt	\$18,015,000
Fund Balances:	
Board Designated	3,808,224
Other	12,125,904
Total Fund Balances	\$15,934,128
Total Other Liabilities & Fund Balances	\$33,949,128
Total Operating Liabilities & Fund Balances	\$36,540,704

STATEMENT OF REVENUES AND EXPENSES

June 30, 1984

Patient Service Revenue	\$39,030,162
Less uncollectible accounts, free care and contractual allowances	16,048,451
Net Patient Service Revenue	\$22,981,711
Other Operating Revenue	3,077,693
Total Operating Revenue	\$26,059,404

Operating Expenses:

Salaries & Wages	\$10,832,753
Supplies & Expenses	12,647,105
Interest Expense	1,210,531
Depreciation & Amortization	1,583,480
Total Operating Expenses	\$26,273,869
Excess of Operating Expenses over Revenues	\$ (214,465)
Unrestricted Investment Income	1,420,776
Unrestricted Gifts	575,468
Total Excess of Revenues over Expenses	\$ 1,781,779



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It is with sadness that we note the loss of two of our Board members during the past year:

Mrs. Kate Skale

Mrs. Kate Skale died on June 29, 1984. She was the first and only woman member of the Board of Directors of City Trusts, and was appointed a Vice President in 1980. Mrs. Skale was also active in political affairs as a member of the Women's Democratic Club of Philadelphia and the Democratic State Committee. Her 25-year stewardship on the Board and her active participation as a member of the Women's Committee for Wills Eye Hospital made a lasting contribution to our institution and to the city of Philadelphia.

Dr. Max Leon

Dr. Max Leon died on November 2, 1984. A Vice President of the Board of Directors of City Trusts, he served on the Board for 25 years and was chairman of the Girard College committees. Dr. Leon was owner of WDAS radio station for 29 years and was past director of several opera and music organizations. He also served as chairman of the Mayor's Scholarship Committee and as a member of the Child Welfare Advisory Board. As a businessman, civic leader, and musician, Dr. Leon contributed significantly to the quality of life in our community.

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Seated left to right: Dr. Max M. Leon, Vice President; Mrs. Kate Skale, Vice President; Joseph A. Daroff; Wm. Austin Meehan, Esq., President; Harry R. Halloran; Louis J. Esposito, Vice President; Isadore A. Shrager, Esq.

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Ex-Officio members not pictured: Hon. W. Wilson Goode, Mayor; Hon. Joseph E. Coleman, President, City Council.



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